

Department of Health and Human Services

Supported Employment Fidelity Response

CMHC:	West Central Behavioral Health Services
DHHS Response Date:	December 1, 2016 2 nd response 1/24/17

Executive Summary:

Thank you for this detailed SE Fidelity Report and your ongoing efforts to provide high quality services to consumers with psychiatric disabilities. West Central Behavioral Health Services (WCS) achieved an overall “good” fidelity rating.

Please be sure to provide support for your ratings. This was missing on a few of the ratings– for example, for O3, Collaboration with VR, the report should state the frequency for meetings between the WCS SE team and VR in order to substantiate the rating of 3. This additional information is also needed for items rating Collaboration with VR, Individualized job search, and Follow-along supports-time unlimited. Additionally, the ratings for two items were not clearly supported by the text and may need to be adjusted. We noted some references to “ES”, which we assumed were typos, intended to be “SE” (Supported Employment).

There are a few areas in which DHHS would like to see an improvement plan, which we indicated in the response sections of the review below. Please update your “Areas of Focus” section to indicate which items WCS plans to address, how they will be addressed, and a timeline by which the planned actions will be accomplished.

WCS has identified a need to examine the coverage of treatment teams so that there is a SE Specialist attached to no more than 2 teams. Two staff currently cover 5 teams. Restructuring the teams and/or training a new staff member to provide SE services are two options for WCS to explore. In this model, SE staff will have increased knowledge of consumers, more capacity to meet and education consumers about SE, and will be better able to support the team.

WCS identified a goal of developing a stronger relationship, with Vocational Rehabilitation via regular meetings. This is encouraged by DHHS in order to ensure seamless supports between the two agencies.

WCS identified the need to develop and implement different tracking forms to accurately capture some of the SE services.

We commend WCS for providing a Good fidelity service, and also for offering SE out of offices in two different counties (and therefore two different VR offices and staff).

Please update your review and report as requested, and resubmit to Michele Harlan at BMHS by December 16.

DHHS greatly appreciates the thorough review and updated responses submitted on January 12, 2017. Upon review we have determined that WCS is reasonably in compliance with the purpose and intent of the ACT self-fidelity process. We have updated the DHHS response herein accordingly.

WCS has identified four areas of focus in which service implementation changes and/or additions will occur during the first quarter of 2017:

- Regular quarterly meetings with the agency and Vocational Rehabilitation
- A tracking system for employer contacts
- Enhancement of the use of job support plans
- Identify two new locations for community-based services to occur

There were two areas in which DHHS suggested that ratings for some areas were different than what the agency reported; Vocational Unit and Role of Employment Supervisor. Since there was not any information provided to DHHS to support the initial higher ratings, DHHS has assigned the lower ratings. There appeared to be an error in addition on the initial self-fidelity with the score being reported as 102 when in fact it was a 103. DHHS has accordingly adjusted the overall score from 102 to 101.

DHHS commends the agency for the planned specific steps to achieve higher fidelity in Supported Employment. These prioritized Areas of Focus will be the basis for any technical assistance and follow-up activities with BMHS.

This CMHC self-review resulted in a Fidelity rating of: Good Fidelity

Out of a possible 125 points the CMHC reported a score of: 102 Updated score is 101

Improvement Plan Required: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	No Further Action Needed.	Resubmit: Address items: O-1, O-3, S-6, S-11, S-12, S-13
Score Range	Fidelity Level	
115 – 125	Exemplary Fidelity	
100 – 114	Good Fidelity	
74 – 99	Fair Fidelity	
73 and below	Not Supported Employment	

Staffing

1. Caseload Size

Employment specialists have individual employment caseloads. The maximum caseload for any full-time employment specialist is 20 or fewer clients.	Rating = 4 out of 5
DHHS Response:	Acceptable recommendation

2. Vocational Services Staff

Employment specialists provide only employment services.	Rating = 5 out of 5
DHHS Response:	Acceptable recommendation

3. Vocational Generalists

Each employment specialist carries out all phases of employment services, including intake, engagement, assessment, job placement, job coaching, and follow along supports before step down to a less intensive employment support from another MH practitioner.	Rating = 5 out of 5
DHHS Response:	Acceptable recommendation

Organization

1. Integration of rehabilitation with mental health treatment through team assignment.

Employment specialists are part of up to 2 mental health treatment teams from which at least 90% of the employment specialist's caseload is comprised.	Rating = 2 out of 5
DHHS Response:	<p>WCS has 2 SE Specialists cover 5 teams. WCS says they will consider re-structuring of the teams to meet higher fidelity. DHHS recommends that this occur, and provides an estimated time frame for implementation.</p> <p><i>Agency response: Initial WCBH report indicated that the structure of programs had already been reviewed, and that the structure currently in place is believed to be the most efficient for WCBH. Staff and leadership are aware that the current structure is not meeting a "high-fidelity" rating for this item. There is no time-line for implementation as there are no changes currently being considered. If and when program demands change (staffing levels, client levels, increase or decrease in number of clinical teams), alternative structures would be considered.</i></p> <p>DHHS Response: This item aims to rate how intensively SE staff interface with mental health staff in order to exchange information about how clients are doing, in service of improving everyone's ability to help the client. SE workers can provide teams key information about a consumer's challenges and successes that can inform</p>

	the mental health treatment; mental health treatment providers can provide key information that can help a SE worker better develop a job for a consumer. Thus we recommend that SE workers are assigned to specific teams and attend them weekly so that the teams get to know the SE specialist and vice versa, and to provide a regular forum to talk about how shared clients are doing. This is an area in which WCS chose not to set an improvement goal, but could continue to consider as the year progresses.
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2. Integration of rehabilitation with mental health treatment through frequent team contact.

Employment specialists actively participate in weekly mental health treatment team meetings (not replaced by administrative meetings) that discuss individual clients and their employment goals with shared decision-making. Employment specialist's office is in close proximity to (or shared with) their mental health treatment team members. Documentation of mental health treatment and employment services are integrated in a single client chart. Employment specialists help the team think about employment for people who haven't yet been referred to supported employment services.		Rating = 5 out of 5
✓ if applicable <input type="checkbox"/>	Employment specialist attends weekly mental health treatment team meetings.	
✓ if applicable <input type="checkbox"/>	Employment specialist participates actively in treatment team meetings with shared decision-making.	
✓ if applicable <input type="checkbox"/>	Employment services documentation (i.e., vocational assessment/profile, employment plan, progress notes) is integrated into client's mental health treatment record.	
✓ if applicable <input type="checkbox"/>	Employment specialist's office is in close proximity to (or shared with) his or her mental health treatment team members.	
✓ if applicable <input type="checkbox"/>	Employment specialist helps the team think about employment for people who haven't yet been referred to supported employment services.	
DHHS Response:		Acceptable recommendation

3. Collaboration between employment specialists and Vocational Rehabilitation.

Employment specialists and VR counselors have frequent contact for the purpose of discussing shared clients and identifying potential referrals.		Rating = 3 out of 5
DHHS Response:	<p>WCS plans to set up regular (at least quarterly) meetings with VR in both counties. This will ensure more collaboration and seamless referrals. This needs to be more specific as to when these meetings will occur.</p> <p><i>Agency response: The Supported Employment supervisor has reached out to VR in both counties and is in the process of setting up face to face, scheduled meetings on a quarterly basis. These meetings are currently in the process of being scheduled, so will begin sometime in this quarter (Jan-March, 2017), and will occur quarterly thereafter. This schedule will be shared with the Adult Services Program Directors, as well as the Quality Improvement Department.</i></p>	

	DHHS Response: Acceptable recommendation
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4. Vocational Unit.

At least 2 full-time employment specialists and a team leader comprise the employment unit. They have weekly client-based group supervision based on the supported employment model in which strategies are identified and job leads are shared. They provide coverage for each other’s caseload when needed.		Rating = 4 out of 5 Updated rating 3 out of 5
DHHS Response:	The information provided under this item suggests that the SE team aligns with a rating of 3. Acceptable recommendation DHHS Response: The agency did not dispute the rating of 3.	

5. Role of employment supervisor.

Supported employment unit is led by a supported employment team leader. Employment specialists' skills are developed and improved through outcome-based supervision. All five key roles of the employment supervisor are present.		Rating = 4 out of 5 Updated rating = 3 out of 5
✓ if applicable <input type="checkbox"/>	One full-time supervisor is responsible for no more than 10 employment specialists. The supervisor does not have other supervisory responsibilities. (Program leaders supervising fewer than 10 employment specialists may spend a percentage of time on other supervisor activities on a prorated basis.)	
✓ if applicable <input type="checkbox"/>	Supervisor conducts weekly supported employment supervision designed to review client situations and identify new strategies and ideas to help clients in their work lives.	
✓ if applicable <input type="checkbox"/>	Supervisor communicates with mental health treatment team leaders to ensure that services are integrated, to problem solve programmatic issues and to be a champion for the value of work. Attends a meeting for each mental health treatment team on a quarterly basis.	
✓ if applicable <input type="checkbox"/>	Supervisor accompanies employment specialists who are new or having difficulty with job development, in the field monthly to improve skills by observing, modeling and giving feedback on skills, e.g., meeting employers for job development.	
✓ if applicable <input type="checkbox"/>	Supervisor reviews current client outcomes with employment specialists and sets goals to improve program performance at least quarterly.	
DHHS Response:		<p>Since the supervisor carries a full caseload, it appears that he or she does not have time assigned to supervisory activities, and the first key role is not fulfilled. A score of 3 may therefore be more appropriate for this item. Acceptable recommendation</p> <p>DHHS Response: The agency did not dispute the rating of 3.</p>

6. Zero exclusion criteria

All clients interested in working have access to supported employment services regardless of job readiness factors, substance abuse, symptoms, history of violent behavior, cognition impairments, treatment non-adherence, and personal presentation. These apply during supported employment services, too. Employment specialists offer to help with another job when one has ended regardless of the reason that the job ended or the number of jobs held. If VR has screening criteria, the mental health agency does not use them to exclude anybody. Clients are not screened out formally or informally.		Rating = 4 out of 5
DHHS Response:		Acceptable recommendation

7. Agency focus on competitive employment.

Agency promotes work through multiple strategies. Agency intake includes questions about interest in competitive employment. Agency displays written postings (e.g., brochures, bulletin boards, posters) about employment and supported employment services. The focus should be with the agency programs that provide services to adults with severe mental illness. Agency supports	Rating = 4 out of 5
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ways for clients to share work stories with other clients and staff. Agency measures rate of competitive employment and shares this information with agency leaders and staff.	
✓ if applicable <input type="checkbox"/>	Agency intake includes questions about interest in employment
✓ if applicable <input type="checkbox"/>	Agency includes questions about interest in employment on all annual (or semi-annual) assessment or treatment plan reviews.
✓ if applicable <input type="checkbox"/>	Agency displays written postings (e.g., brochures, bulletin boards, posters) about working and supported employment services, in lobby and other waiting areas
✓ if applicable <input type="checkbox"/>	Agency supports ways for clients to share work stories with other clients and staff (e.g., agency-wide employment recognition events, in-service training, peer support groups, agency newsletter articles, invited speakers at client treatment groups, etc.) at least twice a year.
✓ if applicable <input type="checkbox"/>	Agency measures rate of competitive employment on at least a quarterly basis and shares outcomes with agency leadership and staff.
DHHS Response:	Acceptable recommendation

8. Executive Team Support for Supported Employment

Agency executive team members (e.g., CEO/Executive Director, Chief Operating Officer, QA Director, Chief Financial Officer, Clinical director, Medical Director, Human Resource Director) assist with supported employment implementation and sustainability. All five key components of executive team are present.	Rating = 5 out of 5
✓ if applicable <input type="checkbox"/>	Executive Director and Clinical Director demonstrate knowledge regarding the principles of evidence-based supported employment.
✓ if applicable <input type="checkbox"/>	Agency QA process includes an explicit review of the IPS SE program, or components of the program, at least every 6 months through the use of the Supported Employment Fidelity Scale, or until achieving high fidelity, and at least yearly thereafter. Agency QA process uses the results of the fidelity assessment to improve IPS SE implementation and sustainability.
if applicable <input type="checkbox"/>	At least one member of the executive team actively participates at IPS SE leadership team (steering committee) meetings that occur at least every six months for high fidelity programs and at least quarterly for programs that have not yet achieved high fidelity. Steering committee is defined as a diverse group of stakeholders charged with reviewing fidelity, program implementation, and the service delivery system. Committee develops written action plans aimed at developing or sustaining high fidelity services.
if applicable <input type="checkbox"/>	The agency CEO/Executive Director communicates how IPS SE services support the mission of the agency and articulates clear and specific goals for SE and/or competitive employment to all agency staff during the first six months and at least annually (i.e., SE kickoff, all-agency meetings, agency newsletters, etc.). This item is not delegated to another administrator.
✓ if applicable <input type="checkbox"/>	SE program leader shares information about EBP barriers and facilitators with the executive team (including the CEO) at least twice each year. The executive team helps the program leader identify and implement solutions to barriers.
DHHS Response:	Acceptable recommendation

Services

1. Work incentives planning

<p>All clients are offered assistance in obtaining comprehensive individualized work incentives planning (benefits planning) before starting a new job and assistance accessing work incentives planning thereafter when making decisions about changes in work hours and pay. Work incentives planning includes SSA benefits, medical benefits, medication subsidies, housing subsidies, food stamps, spouse and dependent children benefits, past job retirement benefits and any other source of income. Clients are provided information and assistance about reporting earnings to SSA, housing programs, VA programs, etc., depending on the person's benefits</p>	Rating = 5 out of 5
<p>DHHS Response:</p>	<p>Acceptable recommendation</p>

2. Disclosure

<p>Employment specialists provide clients with accurate information and assist with evaluating their choices to make an informed decision regarding what is revealed to the employer about having a disability.</p>	Rating = 5 out of 5
<p>✓ if applicable <input type="checkbox"/></p>	<p>Employment specialists do not require all clients to disclose their psychiatric disability at the work site in order to receive services.</p>
<p>✓ if applicable <input type="checkbox"/></p>	<p>Employment specialists offer to discuss with clients the possible costs and benefits (pros and cons) of disclosure at the work site in advance of clients disclosing at the work site. Employment specialists describe how disclosure relates to requesting accommodations and the employment specialist's role communicating with the employer.</p>
<p>✓ if applicable <input type="checkbox"/></p>	<p>Employment specialists discuss specific information to be disclosed (e.g., disclose receiving mental health treatment, or presence of a psychiatric disability, or difficulty with anxiety, etc.) and offers examples of what could be said to employers.</p>
<p>✓ if applicable <input type="checkbox"/></p>	<p>Employment specialists discuss disclosure on more than one occasion (e.g., if clients have not found employment after 2 months or if clients report difficulties on the job).</p>
<p>DHHS Response:</p>	<p>Acceptable recommendation</p>

3. Ongoing, work-based vocational assessment

Initial vocational assessment occurs over 2-3 sessions and is updated with information from work experiences in competitive jobs. A vocational profile form that includes information about preferences, experiences, skills, current adjustment, strengths, personal contacts, etc. is filed in the client's clinical chart and is updated with each new job experience. Aims at problem solving using environmental assessments and consideration of reasonable accommodations. Sources of information include client, treatment team, clinical records, and with the client's permission, from family members and previous employers.		Rating = 5 out of 5
DHHS Response:	Acceptable recommendation	

4. Rapid search for competitive job.

Initial employment assessment and first face-to-face employer contact by the client or the employment specialist about a competitive job occurs within 30 days (one month) after program entry.		Rating = 4 out of 5
DHHS Response:	Acceptable recommendation. DHHS requests that the specific range of initial contacts be included in the report.	

5. Individualized job search

Employment specialists make employer contacts are aimed at making a good job match based on clients' preferences (relating to what each person enjoys and their personal goals) and needs (including experience, ability, symptomatology, health, etc.) rather than the job market (i.e., those jobs that are readily available). An individualized job search plan is developed and updated with information from the vocational assessment/profile form and new job/educational experiences.		Rating = 4 out of 5
DHHS Response:	Acceptable recommendation	

6. Job development-Frequent employer contact

<p>Each employment specialist makes at least 6 face-to-face employer contacts per week on behalf of clients looking for work. (Rate for each then calculate average and use the closest scale point.) An employer contact is counted even when an employment specialist meets an employer twice in one week, and when the client is present or not present. Client specific and generic contacts are included. Employment specialists use a weekly tracking form to document employer contacts and the form is reviewed by the supervisor on a weekly basis.</p>	<p>Rating = 2 out of 5</p>
<p>DHHS Response:</p>	<p>WCS will develop a tracking system for job development. A timeframe for implementation needs to be provided. WCS proposed requesting a waiver to reconsider the face-to-face aspect of this item and use on-line applications and letters as job development. DHHS would not support this type of proposal, as it would be different from the process of job development as described in the Supported Employment Kit. A large part of the component of “Job Development” is the relationship building that occurs over time, as a result of face-to-face meetings.</p> <p><i>Agency Response: The SE supervisor and SE staff, with support from the Quality Improvement Specialist, will review the section of the EBSE toolkit which specifically discusses job development, and the essential elements that a comprehensive “tracking system” would capture. This tracking system will be developed during the current quarter (January-March), and implemented by April, 2017. This tracking system will be shared with the Adult Services Program Directors, as well as the Quality Improvement Department.</i></p> <p>DHHS Response: Acceptable recommendation</p>

7. Job development-Quality of employer contact

<p>Employment specialists build relationships with employers through multiple visits in person that are planned to learn the needs of the employer, convey what the SE program offers to the employer, and describe client’s strengths that are a good match for the employer.</p>	<p>Rating = 5 out of 5</p>
<p>DHHS Response:</p>	<p>Acceptable recommendation</p>

8. Diversity of jobs developed.

<p>Employment specialists assist clients in obtaining different types of jobs.</p>	<p>Rating = 5 out of 5</p>
<p>DHHS Response:</p>	<p>Acceptable recommendation</p>

9. Diversity of employers.

Employment specialists assist clients in obtaining jobs with different employers.	Rating = 5 out of 5
DHHS Response:	Acceptable recommendation

10.Competitive jobs.

Employment specialists provide competitive jobs options that have permanent status rather than temporary or time-limited status, (e.g., transitional employment positions). Competitive jobs pay at least minimum wage, are jobs that anyone can apply for and are not set aside for people with disabilities. (Seasonal jobs and jobs from temporary agencies that other community members use are counted as competitive jobs.)	Rating = 5 out of 5
DHHS Response:	Acceptable recommendation

11.Individualized follow-along supports

Clients receive different types of support for working a job that are based on the job, client preferences, work history, needs, etc. Supports are provided by a variety of people including treatment team members (i.e., medication changes, social skills training, encouragement), family, friends, co-workers (i.e., natural supports) and employment specialist. Employment specialist also provides employer support (e.g., educational information, job accommodations) at client's request. Employment specialists offer help with career development, i.e., assistance with education, a more desirable job, or more preferred job duties.	Rating = 3 out of 5
DHHS Response:	<p>WCS has identified a need to better document shifts in the type of SE services provided as well as a job support plan. A timeframe for the estimated implementation of the job support plan is requested along with plans on how to address with staff the need for better documentation.</p> <p>Agency response: <i>SE supervisor and SE staff will review the EBSE toolkit and specific reference to "job support plans" which are required in order to receive a higher rating (pg 119 in toolkit). SE staff will review this item, and have a plan in place to enhance their use of job support plans by April 1, 2017. This plan will be submitted to the Adult Services Program Directors, as well as the Quality Improvement Director.</i></p> <p>DHHS Response: Acceptable recommendation</p>

12. Follow-along supports – Time unlimited

<p>Employment Specialists have face-to-face contact within 1 week before starting a job, within 3 days after starting a job, weekly for the first month, and at least monthly for a year or more, on average, after working steadily and desired by clients. Clients are transitioned to step down job supports from a mental health worker following steady employment. Employment specialists contact clients within 3 days of learning about a job loss.</p>	<p>Rating = 3 out of 5</p>
<p>DHHS Response:</p>	<p>WCS identified the lack of a rating of 4 was due to a lack in documentation, namely the use of involvement with family and other “natural supports”. This needs to be identified as to how this will be better documented, along with a timeframe for this to occur. The mechanism on how staff will be encouraged to do this should be included as well.</p> <p><i>Agency response: It seems WCBH initial response was misunderstood. The involvement of family was noted to have increased during this review compared to last reviews. This was evident in the record review, as well as interviews with family members. A rating of “4” was not given as the formula requires clients to be seen by SE staff monthly for a year or more after working steadily. This was not easily verified in the record review – and SE staff report that the frequency of visits once employment has been steady is often less than monthly, per client choice. This is not an area that WCBH targeted for improvement.</i></p> <p>DHHS Response: This is another area in which the agency has chosen to not be a focus. Follow along supports are a key service to support consumers in maintaining employment by providing tips and thinking through strategies for managing symptoms on the job, responding to employer requests, effectively interacting with co-workers, prioritizing time and activities outside of work to ensure success while at work, and so forth. Helping SE staff use motivational approaches to maintaining engagement with consumers for this purpose might be helpful.</p>

13. Community-based services

<p>Employment services such as engagement, job finding and follow-along supports are provided in natural community settings by all employment specialists. (Rate each employment specialist based upon their total weekly scheduled work hours then calculate the average and use the closest scale point.).</p>	<p>Rating = 3 out of 5</p>
<p>DHHS Response:</p>	<p>WCS will evaluate where more work can be done in the community. DHHS would like to see at least 2 new places identified and a timeframe when this will occur.</p> <p><i>Agency response: SE supervisor and staff will explore new places where work can be done in the community. 2 new locations (libraries, coffee shops, etc) that provide privacy and comfort will be identified during this quarter (January-March, 2017). This plan will</i></p>

	<i>be submitted to the Adult Services Program Directors, as well as the Quality Improvement Director.</i> DHHS Response: Acceptable recommendation
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14.Assertive engagement and outreach by integrated team.

Service termination is not based on missed appointments or fixed time limits. Systematic documentation of outreach attempts. Engagement and outreach attempts made by integrated team members. Multiple home/community visits. Coordinated visits by employment specialist with integrated team member. Connect with family, when applicable. Once it is clear that the client no longer wants to work or continue in SE services, the team stops outreach.	Rating = 4 out of 5
DHHS Response:	Acceptable recommendation